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| Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) | | | | <i>Complete if Known</i> | |
| | | | | Application Number | |
| | | | | Filing Date | |
| | | | | First Named Inventor | |
| | | | | Group Art Unit | |
| Examiner Name | | Attorney Docket Number | | | |
| Sheet | 1 | of | 1 | 78104090-N16933 | |

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| Examiner Signature | /Yosef Kassa/ | Date Considered | 02/19/2008 |
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